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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

<b>Application Number</b>		09/361,980
<b>Filing Date</b>		July 28, 1999
<b>First Named Inventor</b>		Yasuaki Tsuzuki et al.
<b>Group Art Unit</b>		1765
<b>Examiner Name</b>		Lynette T. Umez-Eronini
<b>Total Number of Pages in This Submission</b>	<b>Attorney Docket Number</b>	
	4041J-000439	

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form  <input checked="" type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input checked="" type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application)  <input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <p style="text-align: center;"><b>Check for \$110; postcard</b></p>
<b>Remarks</b>  The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750. A duplicate copy of this sheet is enclosed.		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

<b>Firm or Individual name</b>	Harness, Dickey & Pierce, P.L.C.	<b>Attorney Name</b>	Michael J. Schmidt	<b>Reg. No.</b>	34,007
<b>Signature</b>					
<b>Date</b>	DECEMBER 2, 2002				

## CERTIFICATE OF MAILING/TRANSMISSION

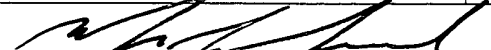
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<b>Typed or printed name</b>	Michael J. Schmidt		
<b>Signature</b>		<b>Date</b>	Dec 2, 2002

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<b>PTO</b> <b>DEC 06 2002</b> <b>TRADE</b> <b>FEE TRANSMITTAL</b> for FY 2003 <small>Patent fees are subject to annual revision.</small>	<b>Complete if Known</b>	
	Application Number	09/361,980
	Filing Date	July 28, 1999
	First Named Inventor	Ito et al.
	Examiner Name	Lynette T. Umez-Eronini
	Group / Art Unit	1765
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		
<b>TOTAL AMOUNT OF PAYMENT</b>	<b>(\$)</b>	<b>110</b>
Attorney Docket No.		4041J-000439

<b>METHOD OF PAYMENT (check all that apply)</b>		<b>FEE CALCULATION (continued)</b>																																																																																																																																																																															
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<input type="checkbox"/> Deposit Account:  Deposit Account Number: 08-0750  Deposit Account Name: Harness, Dickey & Pierce, P.L.C.		<table border="1"><thead><tr><th>Large Entity</th><th>Small Entity</th><th>Fee Code</th><th>Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td></td><td></td><td>1051</td><td>130</td><td>2051 65</td><td></td></tr><tr><td></td><td></td><td>1052</td><td>50</td><td>2052 25</td><td></td></tr><tr><td></td><td></td><td>1053</td><td>130</td><td>1053 130</td><td></td></tr><tr><td></td><td></td><td>1812</td><td>2,520</td><td>1812 2,520</td><td></td></tr><tr><td></td><td></td><td>1804</td><td>920*</td><td>1804 920*</td><td></td></tr><tr><td></td><td></td><td>1805</td><td>1,840*</td><td>1805 1,840*</td><td></td></tr><tr><td></td><td></td><td>1251</td><td>110</td><td>2251 55</td><td>110</td></tr><tr><td></td><td></td><td>1252</td><td>400</td><td>2252 200</td><td></td></tr><tr><td></td><td></td><td>1253</td><td>920</td><td>2253 460</td><td></td></tr><tr><td></td><td></td><td>1254</td><td>1,440</td><td>2254 720</td><td></td></tr><tr><td></td><td></td><td>1255</td><td>1,960</td><td>2255 980</td><td></td></tr><tr><td></td><td></td><td>1401</td><td>320</td><td>2401 160</td><td></td></tr><tr><td></td><td></td><td>1402</td><td>320</td><td>2402 160</td><td></td></tr><tr><td></td><td></td><td>1403</td><td>280</td><td>2403 140</td><td></td></tr><tr><td></td><td></td><td>1451</td><td>1,510</td><td>1451 1,510</td><td></td></tr><tr><td></td><td></td><td>1452</td><td>110</td><td>2452 55</td><td></td></tr><tr><td></td><td></td><td>1453</td><td>1,280</td><td>2453 640</td><td></td></tr><tr><td></td><td></td><td>1501</td><td>1,280</td><td>2501 640</td><td></td></tr><tr><td></td><td></td><td>1502</td><td>460</td><td>2502 230</td><td></td></tr><tr><td></td><td></td><td>1503</td><td>620</td><td>2503 310</td><td></td></tr><tr><td></td><td></td><td>1460</td><td>130</td><td>1460 130</td><td></td></tr><tr><td></td><td></td><td>1807</td><td>50</td><td>1807 50</td><td></td></tr><tr><td></td><td></td><td>1806</td><td>180</td><td>1806 180</td><td></td></tr><tr><td></td><td></td><td>8021</td><td>40</td><td>8021 40</td><td></td></tr><tr><td></td><td></td><td>1809</td><td>740</td><td>2809 370</td><td></td></tr><tr><td></td><td></td><td>1810</td><td>740</td><td>2810 370</td><td></td></tr><tr><td></td><td></td><td>1801</td><td>740</td><td>2801 370</td><td></td></tr><tr><td></td><td></td><td>1802</td><td>900</td><td>1802 900</td><td></td></tr></tbody></table>		Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid			1051	130	2051 65				1052	50	2052 25				1053	130	1053 130				1812	2,520	1812 2,520				1804	920*	1804 920*				1805	1,840*	1805 1,840*				1251	110	2251 55	110			1252	400	2252 200				1253	920	2253 460				1254	1,440	2254 720				1255	1,960	2255 980				1401	320	2401 160				1402	320	2402 160				1403	280	2403 140				1451	1,510	1451 1,510				1452	110	2452 55				1453	1,280	2453 640				1501	1,280	2501 640				1502	460	2502 230				1503	620	2503 310				1460	130	1460 130				1807	50	1807 50				1806	180	1806 180				8021	40	8021 40				1809	740	2809 370				1810	740	2810 370				1801	740	2801 370				1802	900	1802 900	
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<b>SUBMITTED BY</b>		<b>Complete (if applicable)</b>	
Name (Print/Type)	Michael J. Schmidt	Registration No. Attorney/Agent	34,007
Signature		Telephone	248-641-1600
		Date	Dec 7, 2002

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